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## NOTICE OF ALLOWANCE AND FEE(S) DUE

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7590

03/10/2006

UNITED STATES SURGICAL, A DIVISION OF TYCO HEALTHCARE GROUP LP 195 MCDERMOTT ROAD NORTH HAVEN, CT 06473 EXAMINER

BAXTER, JESSICA R

ART UNIT PAPER NUMBER

3733

DATE MAILED: 03/10/2006

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/053,889	10/23/2001	Ernest Aranyi	2347	6038

TITLE OF INVENTION: SECOND GENERATION COIL FASTENER APPLIER WITH MEMORY RING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/12/2006

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. <u>PROSECUTION ON THE MERITS IS CLOSED</u>. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN <u>THREE MONTHS</u> FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. <u>THIS STATUTORY PERIOD CANNOT BE EXTENDED</u>. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.
- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.
- II. PART B FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.
- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

### PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further con indicated unless corrected b maintenance fee notification	respondence including the loelow or directed otherwise	Patent, advance ordin Block 1, by (a)	ders and notifica ) specifying a ne	ation ew co	of maintenance fees orrespondence address	will be mailed to the current s; and/or (b) indicating a sep	correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
50855 759	90 03/10/2006							
UNITED STATES SURGICAL, A DIVISION OF TYCO HEALTHCARE GROUP LP 195 MCDERMOTT ROAD				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with States Postal Service with sufficient postage for first class mail in addressed to the Mail Stop ISSUE FEE address above, or being transmitted to the USPTO (571) 273-2885, on the date indicated be				
NORTH HAVEN,	CT 06473						(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE	I	FIRST NAMED IN	VEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/053,889	10/23/2001		Ernest Arai	nyi		2347	6038	
TITLE OF INVENTION: SE	SMALL ENTITY	ISSUE FE			BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
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nonprovisional	NO	\$1400			\$300	\$1700 <b>T</b>	06/12/2006	
EXAM	<del> </del>	ART UNI	AT	CL	ASS-SUBCLASS	J		
BAXTER, J		3733		623-001110		<del></del>		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (pr	rint o	r type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	lata will appear a substitute for	on th	ne patent. If an assig g an assignment.	nee is identified below, the d	locument has been filed for	
(A) NAME OF ASSIGNI	EE		(B) RESIDENC	E: (C	CITY and STATE OR	COUNTRY)		
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the pater	nt) :	☐ Individual ☐ C	Corporation or other private gro	oup entity Government	
4a. The following fee(s) are	enclosed:		4b. Payment of Fee(s):					
☐ Issue Fee	mall entity discount permitte		☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.					
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					
5. Change in Entity Status			□ b	:	laman alaimina SMA	I I ENTITY status Con 27 C	ED 1 27(a)(2)	
	MALL ENTITY status. See		• • •		•	LL ENTITY status. See 37 C		
NOTE: The Issue Fee and Printerest as shown by the reco	ablication Fee (if required) vords of the United States Pate	vill not be accepted ent and Trademark	from anyone oth Office.	her th	nan the applicant; a reg	ly paid issue fee to the applications and attorney or agent; or the	he assignee or other party in	
Authorized Signature					Date			
Typed or printed name			Registration No.					
This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313- Under the Paperwork Reduct	n is required by 37 CFR 1.3 ty is governed by 35 U.S.C. plication form to the USPT for reducing this burden, st nia 22313-1450. DO NOT 1450. tion Act of 1995, no persons	11. The information 122 and 37 CFR I O. Time will vary sould be sent to the SEND FEES OR C are required to res	n is required to o 1.14. This collect depending upon Chief Informatic COMPLETED FO pond to a collecti	btain tion i the i on O ORM ion o	or retain a benefit by s estimated to take 12 ndividual case. Any c fficer, U.S. Patent and S TO THIS ADDRES f information unless it	the public which is to file (an minutes to complete, includin comments on the amount of till Trademark Office, U.S. Dep S. SEND TO: Commissioner displays a valid OMB control	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, I number.	



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195 MCDERMO' NORTH HAVEN	<del>-</del>		3733 DATE MAILED: 03/10/200	6		

# Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 522 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 522 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 or (571)-272-4200.